

CAL FIRE OFFICE OF THE STATE FIRE MARSHAL GOVmotus Special Event Application

Overview

The California Office of the State Fire Marshal (OSFM) Fire & Life Safety Division is the authority having jurisdiction for all Special Events on State of California owned, specified state occupied and state institution properties. To request a permit for a special event on state property, please complete the following information and submit this form with all applicable documentation to the OSFM Fire & Life Safety Division.

In addition to the information below, please include:

- OSFM Special Event Cover Page with the event name.
- Site map and schematic layout for the entire event.
- All applicable information for event activities, fabric flame resistance certifications, fireworks information etc.
- Emergency access for fire equipment must be provided (20' minimum).
- Location of all grandstands, stages, tents, temporary fencing, cooking areas, generators, vendors, etc.
- Location of all exits, path of travel to exits, and specify all exit and exit aisle widths.
- Location of tables and chairs and/or chair rows.
- Location of fire extinguishers and electrical panels.
- Seating with more than 200 chairs shall be bonded in groups of 3 or more chairs.
- Tents 20' from all buildings.
- No open flames without OSFM approval.
- Provide measurements on layouts for exit widths, access roads, gates, and stages.
- Reference the OSFM Special Event Tri-Fold.
- Final approval of the permit may be subject to a field inspection. Stand-by personnel
 may be required for the event at the discretion of the Office of the State Fire Marshal.
- INCLUDE THIS COVER PAGE AS THE FIRST PAGE OF YOUR MULTIPAGE FILE DURING FILE UPLOAD. See the Special Events section at our website. http://osfm.fire.ca.gov/divisions/fire-and-life-safety-division/

APPLICATION INFOR	RMATION
*Project Name:	
*Project Description:	
Alternate	
Application Number Master Permit	
Number	
*Permit Type	
*Plan Document Format (Electronic or	
Paper):	
PROJECT LOCATION	
Location Name:	
*Address:	
*City/State:	
*Zip Code:	
*County:	
SFM File Number Info	
APPLICANT INFORM	ATION
Business Name	
*First Name:	
*Last Name:	
*Address:	
*City/State:	
*Zip Code:	
*Phone Number:	
*Contact Preference	
*Email:	
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OWNER INFORMATI	ON



STATE OF CALIFORNIA, NATURAL RESOURCES AGENCY DEPARTMENT OF FORESTRY AND FIRE PROTECTION OFFICE OF THE STATE FIRE MARSHAL – FIRE & LIFE SAFETY

GOVmotus Special Event Application Sample Information Required

*Owner Name:	
Owner's Project	
Number	
*Agency Billing Code:	
*Address:	
*City/State:	
*Zip Code	
Owner Contact Info	
*First Name:	
*Last Name:	
*Phone Number:	
*Contact Preference	
*Email Address:	
SPECIAL EVENT INFO	ORMATION
*Type of Activity	
(Festival, Concert,	
Tradeshow, Other):	
*Other Type of Activity	
*Event Sponsor:	
*Event Start	
Date/Time: *Event End	
Date/Time:	
*Estimated Daily	
Attendance:	
*Event Description:	

Authority

I, the undersigned, am the person applying for the above permit. I hereby certify under penalty of perjury under the laws of the State of California, that all information contained in this application is true in every respect. I understand that additional information may be requested, and site inspections may be performed before permit issuance.

Applicant Signature:	 Date:	